BRIAN SANDOVAL Governor

RAYMOND E. SMITH SR. Executive Director

NEVADA STATE BOARD OF EXAMINERS FOR MARRIAGE & FAMILY THERAPISTS AND CLINICAL PROFESSIONAL COUNSELORS

9436 W. Lake Mead Blvd. Suite 11-J Las Vegas, Nevada 89134-8342 Office: (702) 486-7388 FAX: (702) 486-7258

https://marriage.state.nv.us

LICENSED MENTAL HEALTH PROFESSIONAL ON SITE

Intern's name (print)	Signature			Intern license number	
Proposed Location (Organization)				Date	
Address	City	State	Zip	Agency Phone Number	
NEVADA LICENSED MEN	NTAL HEALTH PROFI	ESSIONAL			
certify that I am a licensed r	mental health professional	who will be o	n site where	e the above internship	
applicant will see clients. My telephone number is:				I am normally at this location	
approximately	hours per week.				
Licensed Mental Health Profe	essional on Site (print nam	e and signatur	re)	Date	
Гуре of License	License Numb	per	Te	elephone Number	
INTERNSHIP PRIMARY S	SUPERVISOR				
Nevada Board Approved Prin	nary Supervisor (print nan	ne and signatu	re)	Date	

NOTE: Under NAC641A.196(1) An intern may engage in private practice only at facilities which have a licensed marriage and family therapist, clinical professional counselor, clinical alcohol and drug abuse counselor, psychologist, psychiatrist or social worker on the site.